



Filing ID #10022044

FINANCIAL DISCLOSURE REPORT

Clerk of the House of Representatives • Legislative Resource Center • 135 Cannon Building • Washington, DC 20515

FILER INFORMATION

Name: Lynda Bourque Moss
Status: Congressional Candidate
State/District: MToo

FILING INFORMATION

Filing Type: Candidate Report
Filing Year: 2018
Filing Date: 05/9/2018

SCHEDULE A: ASSETS AND "UNEARNED" INCOME

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
American Century Mutual Funds, Inc [MF]		\$15,001 - \$50,000	Tax-Deferred		
Brandes Invt. International Small Cap [MF]		\$1,001 - \$15,000	Dividends	None	None
Columbia FDS SER Tr II Mass [MF]		\$1,001 - \$15,000	Dividends	None	None
Growth Fund Amer Inc [MF] DESCRIPTION: Reinvest		\$15,001 - \$50,000	Dividends	None	None
Hillside Apartments [RP] LOCATION: Yellowstone County, MT, US		None	None		
Mill Creek Cabin [RP] LOCATION: Park County, MT, US		\$100,001 - \$250,000	Rent	\$5,001 - \$15,000	\$5,001 - \$15,000
Oppenheimer Capital [MF]		\$15,001 - \$50,000	Capital Gains	\$5,001 - \$15,000	None
Oppenheimer Main Street [MF]		\$15,001 - \$50,000	Capital Gains	\$15,001 - \$50,000	None

Asset	Owner	Value of Asset	Income Type(s)	Income Current Year to Filing	Income Preceding Year
Oppenheimer Main Street All CAP Fund [MF]		\$15,001 - \$50,000	Dividends	None	None
Oppenheimer Mid Cap Value [MF]		\$15,001 - \$50,000	Dividends	None	None
TransAmerica International [MF]		\$15,001 - \$50,000	Dividends	None	None

* For the complete list of asset type abbreviations, please visit <https://fd.house.gov/reference/asset-type-codes.aspx>.

SCHEDULE C: EARNED INCOME

Source	Type	Amount Current Year to Filing	Amount Preceding Year
Northwest Area Foundation	Compensation	\$23,800.00	\$18,800.00
Montana State Public Employees	Pension Fund	\$13,749.00	\$13,800.00

SCHEDULE D: LIABILITIES

None disclosed.

SCHEDULE E: POSITIONS

Position	Name of Organization
Vice Chair and Trustee	Northwest Area Foundation
Board Member	American Craft Council
Board Member	Montana State Fund

SCHEDULE F: AGREEMENTS

Date	Parties To	Terms of Agreement
January 2014	Myself and Montana Public Employees Retirement System	Pension/Retirement Benefits

SCHEDULE J: COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Source (Name and Address)	Brief Description of Duties
Montana Vacation Rentals (Livingston, MT, US)	Vacation Rental

Source (Name and Address)	Brief Description of Duties
Northwest Area Foundation (Saint Paul, MN, US)	Board Compension

EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION

Trusts: Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?
☐ Yes ☒ No

Exemption: Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?
☐ Yes ☒ No

CERTIFICATION AND SIGNATURE

☒ I CERTIFY that the statements I have made on the attached Financial Disclosure Report are true, complete, and correct to the best of my knowledge and belief.

Digitally Signed: Lynda Bourque Moss , 05/9/2018